

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51			
2		1					52			
3		1					53			
4	1						54			
5		1					55			
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7	1						57			
8		1					58			
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43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	5						Total Indep			
Total Depend	15						Total Depend			
Total Claims	90						Total Claims			